

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

VOTE 2 REDUCE DEBT (V2RD)

ADDRESS (number and street)

1005 CONGRESS AVE STE 350

☐ Check if different than previously reported. (ACC)

AUSTIN

TX

78701

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00563064

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☒ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

LA

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

11

25

2014

through

M M M / D D D / Y Y Y Y Y Y

12

26

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. KENNETH W. DAVIS JR.

Signature of Treasurer

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

01

31

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VOTE 2 REDUCE DEBT (V2RD)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 25 / 2014 To: M M / D D / Y Y Y Y Y Y  
12 / 26 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2014</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	33125.84	
(c) Total Receipts (from Line 19) .....	71317.42	2991454.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	104443.26	2991454.50
7. Total Disbursements (from Line 31) .....	62895.86	2949907.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	41547.40	41547.40
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**VOTE 2 REDUCE DEBT (V2RD)**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	1	4

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

67284.16

2967926.23

(ii) Unitemized .....

0.00

2569.01

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

67284.16

2970495.24

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5279.04

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

67284.16

2975774.28

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

4033.26

15660.79

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

19.43

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

71317.42

2991454.50

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

71317.42

2991454.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	34168.18	1300122.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	34168.18	1300122.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	28727.68	1649784.97
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	62895.86	2949907.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62895.86	2949907.10

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	67284.16	2975774.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	67284.16	2975774.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	34168.18	1300122.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	4033.26	15660.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	30134.92	1284461.34

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

Report is amended because the Pre-General report was amended and removed a transactions for \$3022.02, from Sch D and a transaction for \$18000 from Sch B. Such revisions impacts Column B aggregate year to date totals for this report.

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Mr. KENNETH W. DAVIS JR.**

Mailing Address PO Box 999

City

FORT WORTH

State

TX

Zip Code

76101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ken Davis Finance

Occupation

Board Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2853638.30

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2014

Transaction ID : SA11AI.6397

Amount of Each Receipt this Period

28346.23

Full Name (Last, First, Middle Initial)

**B. Mr. KENNETH W. DAVIS JR.**

Mailing Address PO Box 999

City

FORT WORTH

State

TX

Zip Code

76101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ken Davis Finance

Occupation

Board Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2872399.84

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2014

Transaction ID : SA11AI.6398

Amount of Each Receipt this Period

18761.54

Full Name (Last, First, Middle Initial)

**C. Mr. KENNETH W. DAVIS JR.**

Mailing Address PO Box 999

City

FORT WORTH

State

TX

Zip Code

76101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ken Davis Finance

Occupation

Board Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2892526.23

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

Transaction ID : SA11AI.6399

Amount of Each Receipt this Period

20126.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

67234.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Mr. Dennis Hendrix**

Mailing Address 1401 Princeton Avenue

City State Zip Code  
 Midland TX 79701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Great Western Drilling

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014

Transaction ID : SA11AI.6395

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

67284.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

## **A. ADP**

Mailing Address 1 ADP Blvd

Ste 1

City

Roseland

State

NJ

Zip Code

07068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

659.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2014

Transaction ID : SA15.6436

Amount of Each Receipt this Period

200.00

Refund of Overpayment of Service Fee

Full Name (Last, First, Middle Initial)

## **B. Atterra 25**

Mailing Address 526 39th St

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

Transaction ID : SA15.6392

Amount of Each Receipt this Period

2225.01

Check Cancelled. Reissued in 2015-Q1

Full Name (Last, First, Middle Initial)

## **C. Sperry Van Ness/ArkBest Realty Inc.**

Mailing Address 724 Garland St

City

Little Rock

State

AR

Zip Code

72201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

Transaction ID : SA15.6390

Amount of Each Receipt this Period

900.00

Refund of Rental Fee

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3325.01

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA15  
Transaction ID : SA15.6390

This vendor is now known as Chenal Parkway Properties LLC, 15000 Chenal Parkway, Little Rock, AR 72211

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

## **A. Staples**

Mailing Address 500 Staples Dr

City

Farmingham

State

MA

Zip Code

01702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

599.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

**Transaction ID : SA15.6393**

Amount of Each Receipt this Period

57.77

Refund from Returns

Full Name (Last, First, Middle Initial)

## **B. Staples**

Mailing Address 500 Staples Dr

City

Farmingham

State

MA

Zip Code

01702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

731.68

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

**Transaction ID : SA15.6394**

Amount of Each Receipt this Period

132.28

Refund from Returns

Full Name (Last, First, Middle Initial)

## **C. Travelocity USA**

Mailing Address 3150 Sabre Dr

City

Southlake

State

TX

Zip Code

76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1855.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2014

**Transaction ID : SA15.6448**

Amount of Each Receipt this Period

518.20

Refund of Airfare

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

708.25

4033.26

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

Category/  
Type

70.36

Category/  
Type

### C. Albertson's Grocery

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and middle-right of the '0', and the top-left, top-right, and middle-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and middle-right of the '2', the top-left, top-right, and middle-right of the '0', the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '4'.

Category/  
Type

State:  District:

[MEMO ITEM]

Age Group	Percentage
18-24	140.72
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Alliant Insurance Services Inc.**

Mailing Address PO Box 27025

City Richmond      State VA      Zip Code 23261

Purpose of Disbursement  
Insurance Premium

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.6414**

Amount of Each Disbursement this Period

95.46

Full Name (Last, First, Middle Initial)

**B. Antoine's Restaurant**

Mailing Address 701 St. Louis St

City New Orleans      State LA      Zip Code 70130

Purpose of Disbursement  
Reimbursement for Travel Meal - H. Pickels

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6506**

Amount of Each Disbursement this Period

140.88

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Arsaga's at the Depot**

Mailing Address 233 31st St N

City St. Petersburg      State FL      Zip Code 33713

Purpose of Disbursement  
Reimbursement for Travel Meal - J. Young

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6540**

Amount of Each Disbursement this Period

15.00

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 5014

City Carol Stream      State IL      Zip Code 60197

Purpose of Disbursement  
Phone Bill

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.6416**

Amount of Each Disbursement this Period

132.69

Full Name (Last, First, Middle Initial)

**B. Authorize.net**

Mailing Address PO Box 947

City American Fort      State UT      Zip Code 84003

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.6411**

Amount of Each Disbursement this Period

47.50

Full Name (Last, First, Middle Initial)

**C. Bistro Byronz**

Mailing Address 5412 Government Rd

City Baton Rouge      State LA      Zip Code 70806

Purpose of Disbursement  
Reimbursement for Travel Meal - H. Pickels

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6515**

Amount of Each Disbursement this Period

28.87

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.19

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

### A. Bordinos

Mailing Address 310 W Dickson St

City	State	Zip Code
Fayetteville	AR	73701

Purpose of Disbursement	Reimbursement for Travel Meal - J. Young
-------------------------	--

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6541

Amount of Each Disbursement this Period

103.37

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### B. Cache Restaurant

Mailing Address 425 President Clinton Ave

City	State	Zip Code
Little Rock	AR	72201

Purpose of Disbursement
Reimbursement for Travel Meal - J. Young

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6539

Amount of Each Disbursement this Period

120.23

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### C. Calder Group LLC

Mailing Address PO Box 552

City	State	Zip Code
Portland	MI	48875

Purpose of Disbursement	Amount	Account Number	Account Name	Account Type	Account Description	Account Balance	Account Status	Account Remarks
GOTV Consultant Fees and Expenses								

Candidate Name \_\_\_\_\_

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6423

Amount of Each Disbursement this Period

435.82

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

435.82

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

**[MEMO ITEM]**

207.71

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and middle-right of the '1', and the top-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and middle-right of the '0', and the top-left, top-right, and middle-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and middle-right of the '2', the top-left, top-right, and middle-right of the '0', the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '4'.

1208.42

[MEMO ITEM]

Diagram of a rectangular channel with a width of 207.71.

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

Three stylized representations of the numbers 12, 08, and 2014 using the letters M, D, and Y. The first number, 12, is formed by two 'M's. The second number, 08, is formed by two 'D's. The third number, 2014, is formed by four 'Y's. Each number is enclosed in a square frame with a small square in the top-left corner.

Category/  
Type

**[MEMO ITEM]**

Category/  
Type

**[MEMO ITEM]**

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and bottom-right of the '0', and the top-left, top-right, and bottom-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and bottom-right of the '2', the top-left, top-right, and bottom-right of the '0', the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '4'.

Category/  
Type

[MEMO ITEM]

0.00





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 48

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Intuit Inc.**

Mailing Address 2632 Marine Way

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Software License

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2014
**Transaction ID : SB21B.6410**

Amount of Each Disbursement this Period

42.59

Full Name (Last, First, Middle Initial)

**B. Ken Davis Finance Co**Mailing Address 309 West 17th St  
Ste 800

City Fort Worth      State TX      Zip Code 76102

Purpose of Disbursement  
Reimbursement for Shipping Charges - Ken Davis Finance Co

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 08 / 2015
**Transaction ID : SB21B.6378**

Amount of Each Disbursement this Period

64.96

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Missile Mart Inc**

Mailing Address 4050 Calion Hwy

City El Dorado      State AR      Zip Code 71730

Purpose of Disbursement  
Reimbursement for Fuel - J. Young

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6536**

Amount of Each Disbursement this Period

102.65

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.59

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

Three stylized representations of the numbers 12, 08, and 2014 using the letters M, D, and Y. The first number, 12, is formed by two 'M's. The second number, 08, is formed by two 'D's. The third number, 2014, is formed by four 'Y's. Each number is enclosed in a square frame with a small square in the top-left corner.

Category/  
Type

**[MEMO ITEM]**

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

[MEMO ITEM]

41.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 48

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. One Degree LLC**

Mailing Address 6911 Marina Shores Ct

City	State	Zip Code
Arlington	TX	77016

Purpose of Disbursement  
Media Consulting and Broadcast Talent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

**Transaction ID : SB21B.6220**

Amount of Each Disbursement this Period

6000.00
---------

Full Name (Last, First, Middle Initial)

**B. One Degree LLC**

Mailing Address 6911 Marina Shores Ct

City	State	Zip Code
Arlington	TX	77016

Purpose of Disbursement  
Media Consulting and Broadcast Talent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

**Transaction ID : SB21B.6440**

Amount of Each Disbursement this Period

6000.00
---------

Full Name (Last, First, Middle Initial)

**C. One Degree LLC**

Mailing Address 6911 Marina Shores Ct

City	State	Zip Code
Arlington	TX	77016

Purpose of Disbursement  
Media Consulting and Broadcast Talent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

**Transaction ID : SB21B.6441**

Amount of Each Disbursement this Period

6000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

18000.00
----------

--

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.6220

Transaction was original reported under the name of the business owner, Mike Snyder.

Form/Schedule: SB21B  
Transaction ID: SB21B.6440

Transaction was original reported under the name of the business owner, Mike Snyder.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.6441

Transaction was original reported under the name of the business owner, Mike Snyder.

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 48

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Peak Political Solutions**

Mailing Address 9625 Blue Grass Place

City Colorado Springs      State CO      Zip Code 80925

Purpose of Disbursement  
GOTV Consultant Fees and Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6426**

Amount of Each Disbursement this Period

1099.01

Full Name (Last, First, Middle Initial)

**B. Robin Phillips**

Mailing Address PO BOx 100285

City Anchorage      State AK      Zip Code 99510

Purpose of Disbursement  
Reimbursement for Shipping from USPS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6424**

Amount of Each Disbursement this Period

638.52

Full Name (Last, First, Middle Initial)

**C. Hunter Pickels**

Mailing Address 6536 LaSalle Ave

City Baton Rouge      State LA      Zip Code 70806

Purpose of Disbursement  
Reimbursement for Travel Meal - Walk-Ons

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6483**

Amount of Each Disbursement this Period

48.32

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1785.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

### A. Hunter Pickels

Date of Disbursement

Transaction ID : SB21B.6485

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2500.00

### B. Hunter Pickels

Date of Disbursement

M M / D D / Y Y Y Y  
12 08 2014

Transaction ID : SB21B.6486

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	190.42
25-34	~10
35-44	~10
45-54	~10
55-64	~10
65-74	~10
75-84	~10
85+	~10

### C. Hunter Pickels

Date of Disbursement

Transaction ID : SB21B.6487

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Response	Percentage
U.S. should take more action to reduce global warming	140.88%

2831.30

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

### A. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement	Reimbursement for Accommodations - DoubleTree
-------------------------	---

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6488

Amount of Each Disbursement this Period

1208.42

Full Name (Last, First, Middle Initial)

### B. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement
Reimbursement for Parking - Chimes Parking

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6490

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

### C. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement  
Reimbursement for Travel Meal - The Pelican

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and bottom-right of the '0', and the top-left, top-right, and bottom-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and bottom-right of the '2', the top-left, top-right, and bottom-right of the '0', the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '4'.

Transaction ID : SB21B.6491

Amount of Each Disbursement this Period

81.25

**SUBTOTAL** of Disbursements This Page (optional).....

1329.67

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

### A. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement
Reimbursement for Travel Meal - FatCow

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6492

Amount of Each Disbursement this Period

22.91

Full Name (Last, First, Middle Initial)

### B. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement	Reimbursement for Travel Meal - The Chimes
-------------------------	--

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6493

Amount of Each Disbursement this Period

107.33

Full Name (Last, First, Middle Initial)

### C. Hunter Pickels

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement	Reimbursement for Travel Meal - Raising Caine
-------------------------	---

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and middle-right of the '0', and the top-left, top-right, and middle-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and middle-right of the '2', the top-left, top-right, and middle-right of the '0', the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '4'.

Transaction ID : SB21B.6494

Amount of Each Disbursement this Period

36.40

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

166.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 48

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Hunter Pickels**

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement  
Reimbursement for Phone Charges - Albertsons

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

**Transaction ID : SB21B.6495**

Amount of Each Disbursement this Period

3.23
------

Full Name (Last, First, Middle Initial)

**B. Hunter Pickels**

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement  
Reimbursement for Supplies - Walmart

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

**Transaction ID : SB21B.6496**

Amount of Each Disbursement this Period

59.82
-------

Full Name (Last, First, Middle Initial)

**C. Hunter Pickels**

Mailing Address 6536 LaSalle Ave

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement  
Reimbursement for Travel Meal - Bistro Byronz

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

**Transaction ID : SB21B.6497**

Amount of Each Disbursement this Period

28.87
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.92
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## VOTE 2 REDUCE DEBT (V2RD)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 48

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 500 Staples Dr

City Farmingham      State MA      Zip Code 01702

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      26      2014
**Transaction ID : SB21B.6420**

Amount of Each Disbursement this Period

195.27

Full Name (Last, First, Middle Initial)

**B. The Chimes**

Mailing Address 3357 Highland Rd

City Baton Rouge      State LA      Zip Code 70802

Purpose of Disbursement  
Reimbursement for Travel Meal - H. Pickels

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      08      2014
**Transaction ID : SB21B.6511**

Amount of Each Disbursement this Period

107.33

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. The Faded Rose**

Mailing Address 1619 Rebsamen Pk Rd

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Reimbursement for Travel Meal - J. Young

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      08      2014
**Transaction ID : SB21B.6538**

Amount of Each Disbursement this Period

27.00

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.27

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## VOTE 2 REDUCE DEBT (V2RD)

### A. The Pelican House

Date of Disbursement

Transaction ID : SB21B.6509

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

81.25

**[MEMO ITEM]**

## B. USPS

Date of Disbursement

M M / D D / Y Y Y Y  
12 08 2014

Transaction ID : SB21B.6425

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

638.52

**[MEMO ITEM]**

### C. US Treasury

Date of Disbursement

Transaction ID : SB21B.6437


Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

153.00

153.00

[illegible]



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
VOTE 2 REDUCE DEBT (V2RD)

### A. Walmart

Mailing Address 702 SW 8th St

City	State	Zip Code
Bentonville	AR	72716

Purpose of Disbursement
Reimbursement for Supplies - H. Pickels

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6514

Amount of Each Disbursement this Period

59.82

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## B. Wells Fargo

Mailing Address 900 D Ranch Road 620 S

City	State	Zip Code
Austin	TX	78734

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6404

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

### C. Wells Fargo

Mailing Address 900 D Ranch Road 620 S

City	State	Zip Code
Austin	TX	78734

Purpose of Disbursement	Bank Fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and middle-right of the '1', and the top-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and middle-right of the '0', and the top-left, top-right, and middle-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and middle-right of the '2', the top-left, top-right, and middle-right of the '0', the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '4'.

Transaction ID : SB21B.6402

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

13.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 48

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address 900 D Ranch Road 620 S

City Austin                      State TX                      Zip Code 78734

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6403**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address 900 D Ranch Road 620 S

City Austin                      State TX                      Zip Code 78734

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6406**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Jebb Young**

Mailing Address 4200 Calion Hwy

City El Dorado                      State AR                      Zip Code 71730

Purpose of Disbursement  
Reimbursement for Fuel - Murphy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2014
**Transaction ID : SB21B.6516**

Amount of Each Disbursement this Period

206.75

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.75

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## VOTE 2 REDUCE DEBT (V2RD)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 48

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

Full Name (Last, First, Middle Initial)

**A. Jebb Young**

Mailing Address 4200 Calion Hwy

City  
El DoradoState  
ARZip Code  
71730Purpose of Disbursement  
Reimbursement for Fuel - Missile

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2014

**Transaction ID : SB21B.6520**

Amount of Each Disbursement this Period

102.65
--------

Full Name (Last, First, Middle Initial)

**B. Jebb Young**

Mailing Address 4200 Calion Hwy

City  
El DoradoState  
ARZip Code  
71730Purpose of Disbursement  
Reimbursement for Travel Meal - Olive Garden

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2014

**Transaction ID : SB21B.6521**

Amount of Each Disbursement this Period

49.65
-------

Full Name (Last, First, Middle Initial)

**C. Jebb Young**

Mailing Address 4200 Calion Hwy

City  
El DoradoState  
ARZip Code  
71730Purpose of Disbursement  
Reimbursement for Travel Meal - Faded Rose

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2014

**Transaction ID : SB21B.6522**

Amount of Each Disbursement this Period

27.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

179.30
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## VOTE 2 REDUCE DEBT (V2RD)

### A. Jebb Young

Mailing Address 4200 Calion Hwy

City	State	Zip Code
El Dorado	AR	71730

Purpose of Disbursement	Reimbursement for Travel Meal - Cache
-------------------------	---------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6523

Amount of Each Disbursement this Period

Category	Percentage
Very satisfied	120.23

Full Name (Last, First, Middle Initial)

### B. Jebb Young

Mailing Address 4200 Calion Hwy

City	State	Zip Code
El Dorado	AR	71730

Purpose of Disbursement
Reimbursement for Travel Meal - Arsaga

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.6524

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C. Jebb Young

Mailing Address 4200 Calion Hwy

City	State	Zip Code
El Dorado	AR	71730

Purpose of Disbursement
Reimbursement for Travel Meal - Bordinos

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three digital displays are shown, each with a different set of missing segments. The first display shows '12' with missing segments for the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '2'. The second display shows '08' with missing segments for the top-left, top-right, and bottom-right of the '0', and the top-left, top-right, and bottom-right of the '8'. The third display shows '2014' with missing segments for the top-left, top-right, and bottom-right of the '2', the top-left, top-right, and bottom-right of the '0', the top-left, top-right, and bottom-right of the '1', and the top-left, top-right, and bottom-right of the '4'.

Transaction ID : SB21B.6525

Amount of Each Disbursement this Period

103.37

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

238.60

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## VOTE 2 REDUCE DEBT (V2RD)

### A. Jebb Young

Mailing Address 4200 Calion Hwy

City	State	Zip Code
El Dorado	AR	71730

Purpose of Disbursement
Reimbursement for Accommodations - Hampton Inn

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6526

Amount of Each Disbursement this Period

225.24

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

225.24

**TOTAL** This Period (last page this line number only).....

33921.52

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 OF 48

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**VOTE 2 REDUCE DEBT (V2RD)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Strategic Media 21**

Nature of Debt (Purpose):

Advertising Services and Production

Mailing Address 560 S. Winchester Blvd  
Ste 500City State Zip Code  
San Jose CA 95128

Outstanding Balance Beginning This Period

25000.00

Transaction ID : SD10.6576

Amount Incurred This Period

0.00

Payment This Period

25000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.6576

The entry is not in fact for a debt or obligation outstanding as of the closing date of Post-General Report within the meaning of 11 CFR 104.11. Transaction appears as a work around for the functional limitations of the FEC Filing Software (FFS) to clarify the memo entry on the original filed report and merely indicates that the cost disclosed on the related 24/48 Hour Notice filed during Post-General Report's reporting period was paid after the closing date of the report. Because the actual date of the payment obligation cannot be used for such a Sch D entry if it should appear on a report filed before the date of such obligation because of the limitations in the FFS functionality, this transaction is dated according to the dissemination date of the related Sch E transaction. 24/48 Hour Notice was timely filed on 11/21/2014 on report ID FEC-973393.

Form/Schedule:

Transaction ID:

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 42 OF 48  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>VOTE 2 REDUCE DEBT (V2RD)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00563064	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>One Degree LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>11 / 24 / 2014</b>	
Mailing Address 6911 Marina Shores Ct		Amount 80.07	
City Arlington	State TX	Zip Code 77016	Transaction ID : <b>SE.6365</b>
Purpose of Expenditure Production Talent Expense for Travel for Phone Banks		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>12 / 02 / 2014</b>
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought		22734.02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
Full Name of Payee <b>One Degree LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>11 / 24 / 2014</b>	
Mailing Address 6911 Marina Shores Ct		Amount 80.07	
City Arlington	State TX	Zip Code 77016	Transaction ID : <b>SE.6366</b>
Purpose of Expenditure Production Talent Expense for Travel for Internet Ads		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>12 / 02 / 2014</b>
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought		22814.09	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		160.14	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mr. KENNETH W. DAVIS JR.		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y <b>01 / 31 / 2015</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 43 OF 48  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>VOTE 2 REDUCE DEBT (V2RD)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00563064
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Serendipitous Films Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 24 / 2014</b>
Mailing Address 6125 Airport Freeway Ste 211		Amount 500.00
City Fort Worth	State TX	Zip Code 76117
Purpose of Expenditure Production and Editing Services for Internet Ads	Category/Type	Transaction ID : <b>SE.6367</b> Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 02 / 2014</b>
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought 23314.09		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Serendipitous Films Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 24 / 2014</b>
Mailing Address 6125 Airport Freeway Ste 211		Amount 500.00
City Fort Worth	State TX	Zip Code 76117
Purpose of Expenditure Production and Editing Services for Phone Bank	Category/Type	Transaction ID : <b>SE.6368</b> Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 02 / 2014</b>
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought 23814.09		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	1000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date

MM / DD / YYYY  
**01 / 31 / 2015**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 44 OF 48  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>VOTE 2 REDUCE DEBT (V2RD)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00563064
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Strategic Media 21</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 20 / 2014</b>
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 12500.00
City San Jose	State CA	Zip Code 95128
Purpose of Expenditure Advertising Services and Production	Category/Type	Transaction ID : <b>SE.6577</b> Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 08 / 2014</b>
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought 36832.29		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Strategic Media 21</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 20 / 2014</b>
Mailing Address 560 S. Winchester Blvd Ste 500		Amount 12500.00
City San Jose	State CA	Zip Code 95128
Purpose of Expenditure Advertising Services and Production	Category/Type	Transaction ID : <b>SE.6578</b> Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 08 / 2014</b>
Name of Federal Candidate MARY L LANDRIEU	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought 49332.29		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	25000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**01 / 31 / 2015**

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
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Form/Schedule: SE

Transaction ID : SE.6577

24/48 Hour Notice was timely filed on 11/21/2014 on report ID FEC-973393.

Form/Schedule: SE

Transaction ID: SE.6578

24/48 Hour Notice was timely filed on 11/21/2014 on report ID FEC-973393.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 46 OF 48  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>VOTE 2 REDUCE DEBT (V2RD)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00563064		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>The Political Network</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>		
Mailing Address 225 East 85th St Ste 306			Amount <span style="border: 1px solid black; padding: 2px;">2049.34</span>		
City New York		State NY	Zip Code 10028		Transaction ID : <b>SE.6371</b>
Purpose of Expenditure Telecommunications Charges for Overage Call-Minutes		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">12</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>	
Name of Federal Candidate WILLIAM CASSIDY			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">51381.63</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ _____ Runoff		
Full Name of Payee <b>Travelocity USA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">24</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>		
Mailing Address 3150 Sabre Dr			Amount <span style="border: 1px solid black; padding: 2px;">259.10</span>		
City Southlake		State TX	Zip Code 76092		Transaction ID : <b>SE.6372</b>
Purpose of Expenditure Airfare for Production for Phone Banks		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">12</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>	
Name of Federal Candidate WILLIAM CASSIDY			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">24073.19</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ _____ Runoff		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">2308.44</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Mr. KENNETH W. DAVIS JR. _____ Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2015</span>		

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @G 'CF' +H9A-N5HCB  
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Form/Schedule: SE

Transaction ID : SE.6371

Estimated expenditure of \$4138 was reported on 48 Hour Notice originally filed on 11/12/2014 and amended on 11/18/2014 (to correct a typo in the dates from 2015 to 2014) and it was reported on the Pre-Runoff Report. This vendor's practice is to bill an estimated amount for telephone service minutes and then at the end of the contract bills again for any overage-minutes. After consultation with Mr. Chris Morse of the FEC's Reports Analysis Division, the 48 Hour Notice was not amended to include this additional expenditure and is only reported in this Post-Election Report with this memo.

Form/Schedule:

Transaction ID:

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Mr. KENNETH W. DAVIS JR.*

*[Electronically Filed]*

Signature \_\_\_\_\_ Date 